

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

FREE STATE PAC

ADDRESS (number and street)

P.O. BOX 9191

Check if different  
than previously  
reported. (ACC)

Shawnee Mission

KS

66201

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C

C00455717

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report (Q1)July 15  
Quarterly Report (Q2)October 15  
Quarterly Report (Q3)January 31  
Year-End Report (YE)July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of(d) 30-Day  
POST-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

11 08

2016

in the  
State of

KS

5. Covering Period

M M / D D / Y Y Y Y Y Y

10 20

2016

through

M M / D D / Y Y Y Y Y Y

11 28

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Clark, James, Tice, ,

Type or Print Name of Treasurer

Signature of Treasurer

Clark, James, Tice, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

12 08

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

FREE STATE PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		20		2016

To:

M M	/	D D	/	Y Y Y Y Y
11		28		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2016</td></tr></table>	Y	Y	Y	Y	Y	2016						<table><tr><td colspan="5">130241.38</td></tr></table>	130241.38				
Y	Y	Y	Y	Y													
2016																	
130241.38																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">318036.22</td></tr></table>	318036.22															
318036.22																	
(c) Total Receipts (from Line 19) .....	<table><tr><td colspan="5">35823.46</td></tr></table>	35823.46					<table><tr><td colspan="5">398045.84</td></tr></table>	398045.84									
35823.46																	
398045.84																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">353859.68</td></tr></table>	353859.68					<table><tr><td colspan="5">528287.22</td></tr></table>	528287.22									
353859.68																	
528287.22																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">95125.62</td></tr></table>	95125.62					<table><tr><td colspan="5">269553.16</td></tr></table>	269553.16									
95125.62																	
269553.16																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table><tr><td colspan="5">258734.06</td></tr></table>	258734.06					<table><tr><td colspan="5">258734.06</td></tr></table>	258734.06									
258734.06																	
258734.06																	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**FREE STATE PAC**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10		20		2016

To:

M M	/	D D	/	Y Y Y Y
11		28		2016

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

## (i) Itemized (use Schedule A).....

12500.00

85450.00

## (ii) Unitemized .....

0.00

10.00

## (iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

12500.00

85460.00

## (b) Political Party Committees .....

0.00

0.00

## (c) Other Political Committees

(such as PACs).....

2500.00

260250.00

## (d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

15000.00

345710.00

## 12. Transfers From Affiliated/Other

Party Committees.....

10823.46

42335.84

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

10000.00

10000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

## (a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

## (b) Levin Funds (from Schedule H5) .....

0.00

0.00

## (c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

35823.46

398045.84

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

35823.46

398045.84

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	24625.62	131453.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	24625.62	131453.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65000.00	120000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	5500.00	18100.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	95125.62	269553.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95125.62	269553.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15000.00	345710.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15000.00	345710.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	24625.62	131453.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	24625.62	131453.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FREE STATE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Chippewa Cree Indian Nation**

Mailing Address P.O. Box 544

City  
Box Elder

State  
MT

Zip Code  
59521

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.8255

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Political Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Havematotel Pomo of Upper Lake**

Mailing Address P.O. Box 516

City  
Upper Lake

State  
CA

Zip Code  
95485

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.8260

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
Political Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Otoe Missouri Indian Nation**

Mailing Address 8151 Highway 177

City  
Red Rock

State  
OK

Zip Code  
73034

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 / 10 / 2016

Transaction ID : SA11AI.8258

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
Political Contribution

SUBTOTAL of Receipts This Page (optional).....▶

12500.00

TOTAL This Period (last page this line number only).....▶

12500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 17

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N STREET NW

City  
 WASHINGTON

State  
 DC

Zip Code  
 20036

FEC ID number of contributing  
 federal political committee.

**C** C00009985

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**11** / **07** / **2016**

**Transaction ID : SA11C.8254**

Amount of Each Receipt this Period

2500.00

☐ Memo Item  
 Political Contribution

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
 federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 17

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

FREE STATE PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MOKAN VICTORY FUND**

Mailing Address 4741 CENTRAL ST  
STE 444

City  
KANSAS CITY

State  
MO

Zip Code  
64112

FEC ID number of contributing  
federal political committee.

C

C00625442

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5983.47

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 31 / 2016

Transaction ID : SA12.8253

Amount of Each Receipt this Period

5983.47

☐ Memo Item  
 Political Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MORAN VICTORY COMMITTEE**

Mailing Address PO BOX 541

City

BELLEVILLE

State

KS

Zip Code

66935

FEC ID number of contributing  
federal political committee.

C

C00616268

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

36352.37

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 28 / 2016

Transaction ID : SA12.8263

Amount of Each Receipt this Period

4839.99

☐ Memo Item  
 Political Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

10823.46

TOTAL This Period (last page this line number only).....▶

10823.46



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 17  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOOZMAN, JOHN, , ,**

Mailing Address PO BOX 671

City  
ROGERSState  
ARZip Code  
72757FEC ID number of contributing  
federal political committee.**C** S0AR00150

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2016

**Transaction ID : SA16.8272**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 Political Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUBIO, MARCO, , ,**

Mailing Address PO BOX 661537

City  
MIAMIState  
FLZip Code  
33266FEC ID number of contributing  
federal political committee.**C** S0FL00338

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		10		2016

**Transaction ID : SA16.8271**

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
 Political Contribution

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item
**SUBTOTAL** of Receipts This Page (optional)..... ►

10000.00

**TOTAL** This Period (last page this line number only)..... ►

10000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address P.O. Box 619616

City  
DFW AirportState  
TXZip Code  
75261Purpose of Disbursement  
Airline Tickets

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		25		2016

FEC Identification Number

C

Transaction ID : SB21B.8302

Amount of Each Disbursement this Period

380.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Apple Store**

Mailing Address 1229 Wisconsin Ave. NW

City  
WashingtonState  
DCZip Code  
20007Purpose of Disbursement  
Cell Phone

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		22		2016

FEC Identification Number

C

Transaction ID : SB21B.8274

Amount of Each Disbursement this Period

813.22

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Capital Hill Club**

Mailing Address 300 1st Street SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Food & Beverage

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
11		17		2016

FEC Identification Number

C

Transaction ID : SB21B.8300

Amount of Each Disbursement this Period

210.83

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

1404.05

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Intrust Bank**

Mailing Address 901 Vermont

City  
LawrenceState  
KSZip Code  
66044Purpose of Disbursement  
Bank Fees

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			24			2016					

FEC Identification Number

C

**Transaction ID : SB21B.8275**

Amount of Each Disbursement this Period

18.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Intrust Bank**

Mailing Address 901 Vermont

City  
LawrenceState  
KSZip Code  
66044Purpose of Disbursement  
Bank Fees

001

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			02			2016					

FEC Identification Number

C

**Transaction ID : SB21B.8280**

Amount of Each Disbursement this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Kansas Day Club**

Mailing Address P.O. Box 257

City  
ParkerState  
KSZip Code  
66072Purpose of Disbursement  
Event Sponsor

007

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			21			2016					

FEC Identification Number

C

**Transaction ID : SB21B.8290**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1063.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Moran, Jerry, , ,**

Mailing Address 2400 Sumac Dr.

City  
ManhattanState  
KSZip Code  
66502Purpose of Disbursement  
Travel Expense - Mileage

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		1	7		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.8283**

Amount of Each Disbursement this Period

153.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Moran, Jerry, , ,**

Mailing Address 2400 Sumac Dr.

City  
ManhattanState  
KSZip Code  
66502Purpose of Disbursement  
Travel Expense - Food & Beverage

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	1		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.8285**

Amount of Each Disbursement this Period

132.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Moran, Robba, , ,**

Mailing Address 2400 Sumac Drove

City  
ManhattanState  
KSZip Code  
66502Purpose of Disbursement  
Postage

006

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	1		2	1		2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB21B.8287**

Amount of Each Disbursement this Period

940.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1226.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Novascone, Todd, Todd, ,**

Mailing Address 425 4th. Ave

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Travel Expenses

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.8291

Amount of Each Disbursement this Period

868.44

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address P.O. Box 619616

City  
DFW AirportState  
TXZip Code  
75261Purpose of Disbursement  
Airline Tickets

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.8291.C

Amount of Each Disbursement this Period

404.70

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Fairfield Inn**

Mailing Address 377 Mopar Dr.

City  
HaysState  
KSZip Code  
67601Purpose of Disbursement  
Hotel

002

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			2	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB21B.8291.

Amount of Each Disbursement this Period

137.88

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

868.44

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Novascone, Todd, Todd, ,**

Mailing Address 425 4th. Ave

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Food & Beverage**002**Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	1			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.8291.!**

Amount of Each Disbursement this Period

112.71

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Kam Company**

Mailing Address 2330W. 53rd Terrace

City  
Kansas CityState  
MOZip Code  
64112Purpose of Disbursement  
Fundraising Consulting Fees**003**Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.8264**

Amount of Each Disbursement this Period

8592.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Tuesday Solutions**

Mailing Address 1413 West Virginia Ave

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Fundraising Consulting Fees**003**Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1			0	7			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.8279**

Amount of Each Disbursement this Period

3500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12092.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Tuesday Solutions**

Mailing Address 1413 West Virginia Ave

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Fundraising Consulting Fees

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			21			2016					

FEC Identification Number

C

**Transaction ID : SB21B.8288**

Amount of Each Disbursement this Period

5930.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. U.S. Postmaster**

Mailing Address 424 S. Kansas Ave

City  
TopekaState  
KSZip Code  
66603Purpose of Disbursement  
Postage

006

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			18			2016					

FEC Identification Number

C

**Transaction ID : SB21B.8301**

Amount of Each Disbursement this Period

1411.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address 40 Massachusetts Ave

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Cell Phone Service

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
11			07			2016					

FEC Identification Number

C

**Transaction ID : SB21B.8281**

Amount of Each Disbursement this Period

231.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7573.21

24227.20

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. FISCHER, DEBRA S, , ,**

Mailing Address 717 N WOOD STREET

City  
VALENTINEState  
NEZip Code  
69201Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NE

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	1			2	0	1	6		

FEC Identification Number

C S2NE00094

Transaction ID : SB23.8286

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SENATE LEADERSHIP FUND**

Mailing Address 45 NORTH HILL DRIVE STE 100

City  
WARRENTONState  
VAZip Code  
20186Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	4			2	0	1	6		

FEC Identification Number

C C00571703

Transaction ID : SB23.8267

Amount of Each Disbursement this Period

60000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

65000.00

65000.00



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**FREE STATE PAC**

Full Name (Last, First, Middle Initial)

**A. Boy Scouts of America**

Mailing Address P.O. Box 938

City  
ManhattanState  
KSZip Code  
66505Purpose of Disbursement  
Donation

012

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

FEC Identification Number

C

Transaction ID : SB29.8269

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Johnson County Republican County**

Mailing Address 12651 Metcalf Ave

City  
Overland ParkState  
KSZip Code  
66213Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

FEC Identification Number

C

Transaction ID : SB29.8266

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5500.00

**TOTAL** This Period (last page this line number only).....▶

5500.00